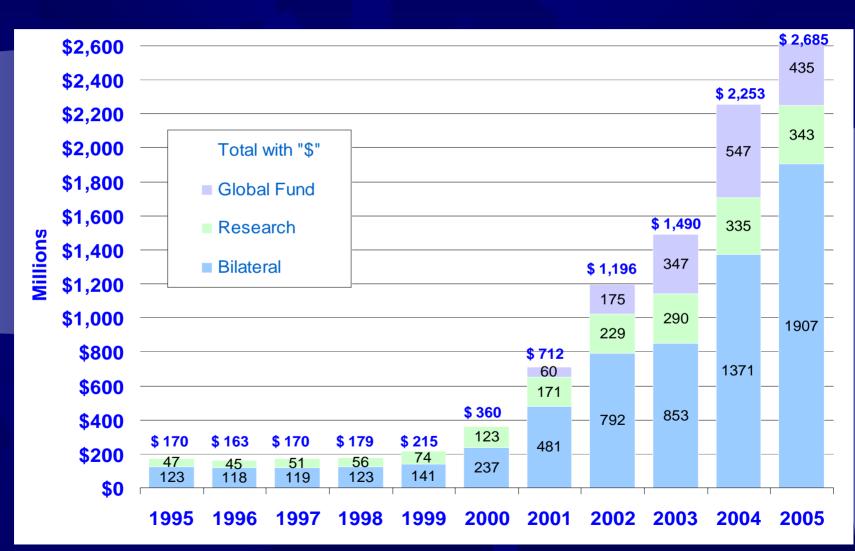
The President's Emergency Plan for AIDS Relief

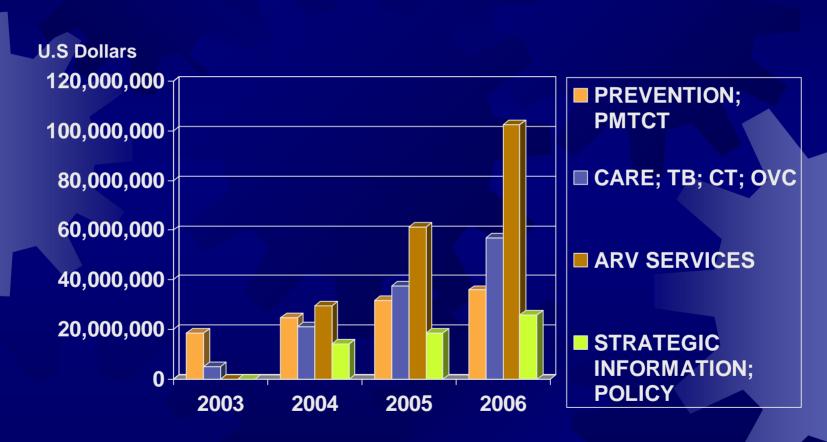


South Africa and the United States Working in Partnership

Federal Funding for International HIV/AIDS: FY 1995-2005 in US\$ Millions



Emergency Plan Resources in South Africa



Expectations

\$15 Billion in 5 years (2004-2008)

- \$5 billion for bilateral
 HIV/AIDS programs in over
 100 countries
- \$1 billion for the Global Fund
- \$9 billion for 15 focus countries



Emergency Plan Focus Countries

Botswana
Cote d'Ivoire
Ethiopia
Guyana
Haiti
Kenya
Mozambique

Namibia Nigeria Rwanda **South Africa Tanzania** Uganda **Vietnam** Zambia



Global Goals: 2-7-10 with 2008 Funding

- Treat 2 million HIV+ people
 - 55% of funding
 - South Africa Goal: 500,000 people on treatment
- Prevent 7 million new infections
 - 20% of funding (33% AB)
 - South Africa Goal: Prevent 1.8 million infections
- Care for 10 million HIV infected and affected individuals (including orphans and vulnerable children)
 - 25% of funding (15% for palliative care)
 - South Africa Goal: Care for 2.5 million South Africans

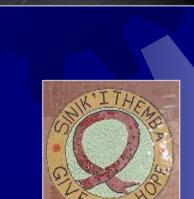
Global Aids Coordinator Requirements

- Strict timetable for funding applications, operational plan and five-year strategy
- Performance-based fund allocations with set targets, indicators and M&E requirements
- State Department oversees other agency budget allocations (except NIH)

Seven Principles of South Africa Program

- Support South Africa Comprehensive Plan
- Partner with Many & Diverse Implementing Organizations
- Build on Demonstrated Success
- Develop Local Capacity
- Plan for Sustainability
- Carefully Measured Results
- USG Program and Management Integration

HIV/AIDS IS THE NUMBER ONE PRIORITY OF THE US MISSION TO SOUTH AFRICA





Approaches to Prevention



- Balanced ABC Program
- Focus on Youth
- Targeted Outreach and Condom Distribution to Most at Risk Populations
- Targeted Media and work with NGOs, CBOs and FBOs
- Prevention of Mother to Child Transmission
- Safe Blood and Safe Medical Practices

Approaches to Care



- Caring for HIV Infected People
 - Opportunistic Infections, particularly TB
 - Palliative Care
- Caring for Orphans and Vulnerable Children
- Community Based Care

Approaches to Treatment

- Assist Government Strategies and Programs
- Partner with Private Providers and Industry
- Develop and Disseminate Best Practices
- Promote Treatment Literacy and Adherence
- Provide Safe and Effective Drugs
- Train Practitioners/ Plan for Sustainability





The Emergency Plan in South Africa, 2006

- \$221 Million in South Africa
- By September, 2005 the Emergency Plan supported:
 - ARV Treatment for 40,000
 - Approximately 10% of ART patients are children
 - PMTCT for 75,000 Women
 - Counseling and Testing for 185,000
 - 80,000 Service Providers Trained





Effective Partnerships

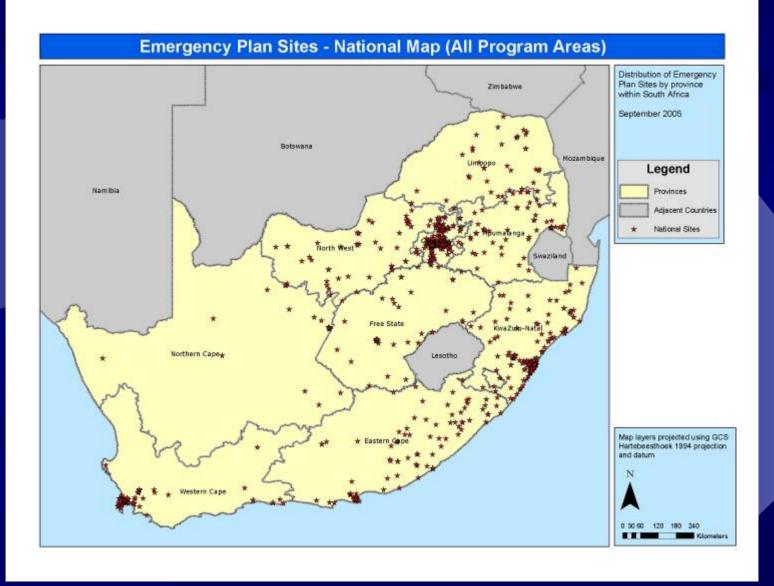
- 81 Prime Partners
- 203 Sub-Partners
- 51 Small Grants Partners
- Active in All Provinces
- Support for
 - FBOs/CBOs/NGOs
 - Government Entities
 - Academic Institutions
 - Public/Private Partnerships
- Support 133 Employees in South African National and Provincial DOHs
- Links to Multi-lateral Organizations and Global Fund



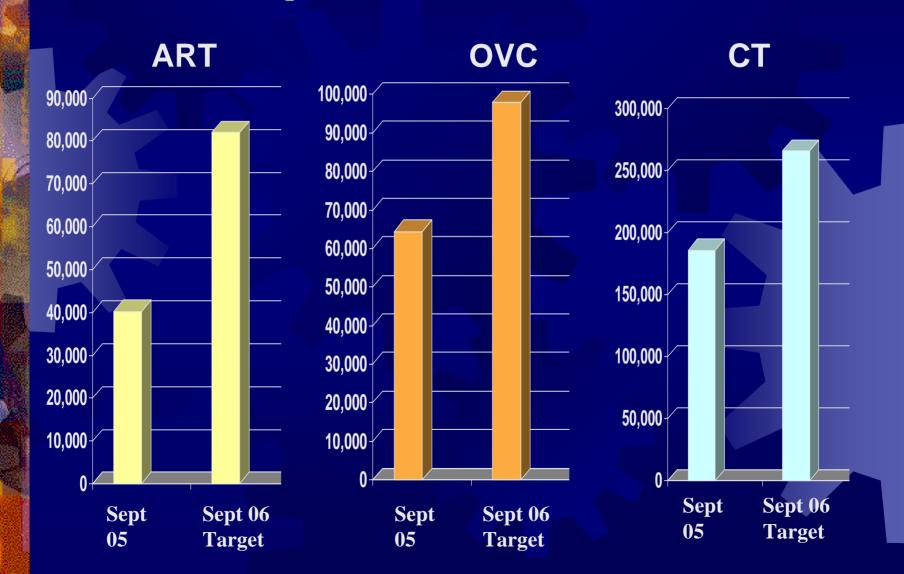
Government Partnerships

- Supporting the South African Government is a Core Principle of the Emergency Plan in South Africa
- The Emergency Plan funds technically sound proposals from Government organizations
- Examples:
 - Department of Health
 - Department of Correctional Services
 - Department of Defense
 - Department of Social Development
 - Department of Education
 - Provincial Departments of Health

Emergency Plan Sites



Scale-Up



Future Directions

- Focus on Prevention
- Enhance Linkages to Expand Services via Public/Private Networking
- Build Public Sector Capacity at all Levels
- Expand Pediatric Treatment
- Expand Counseling and Testing
- Expand TB/HIV Targeted Services
- Support M&E Development









THANK YOU



http://pepfar.pretoria.usembassy.gov